

APPLICATION FORM

Enter EEMP Project Information under Section A

A.1 EEMP PROJECT NAME _____

A.2 EEMP GRANT APPLICANT

Agency Name _____
Street Address (& PO Box) _____
City _____ State _____ ZIP _____

A.3 TYPE of AGENCY (check one) ☐ Local Agency ☐ State Agency ☐ Federal Agency ☐ Non-profit

A.4 EEMP PROJECT CATEGORY (check only one)
☐ Highway Landscaping and Urban Forestry ☐ Resource Lands ☐
Roadside Recreation

A.5 EEMP PROJECT GRANT REQUEST Include all sources of funds. (Do *not* include cost of the Related Transportation Facility.)

EEMP Project Grant Request \$ _____ Estimated Total EEMP Project Cost \$ _____

A.6 EEMP PROJECT LOCATION

Nearest Cross Street _____
County _____
Nearest City _____
Latitude and Longitude _____
Senate District No. _____
Assembly District No. _____

Project Location: Refer to 1-5. North/South Split on page 2. (check only one) ☐ North ☐ South

A.7 APPLICANT'S REPRESENTATIVE AUTHORIZED IN RESOLUTION

Name	Title	Phone
Email address		

Person with day-to-day responsibility for grant project (if different than authorized representative)

Name	Title	Phone
Email address		

A.8 ANTICIPATED EEMP PROJECT START DATE: _____ **COMPLETION DATE:** _____

A.9 BRIEF DESCRIPTION OF EEMP PROJECT Summarize scope, purpose, location & connection to the RTF (60 words)

APPLICATION FORM

Enter Related Transportation Facility Information under Section B

B.1 RELATED TRANSPORTATION FACILITY (RTF)

Transportation District	City	County	Route Number / Name
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Location

Description of Related Transportation Facility

Name of Transportation Agency	Date Construction Began or Scheduled
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Name of Approved/Certified Capital Outlay Program for Related Transportation Facility

B.2 ENVIRONMENTAL CLEARANCE FOR RTF PROJECT (check type and status)

Type:	Exempt__	Negative Declaration__	Categorical Exemption__	EIR __
Status:	Complete__	In Progress__	Not Started__	

What were the primary environmental Impacts of the RTF? (Brief)

Describe the *required* environmental mitigation? (Brief)

B.3 Name of Lead Agency for RTF: _____

B.4 Attach the Letter from the Lead Agency Responsible for the construction of the RTF.
(APPENDIX C)

B.5 Attach a copy of the NOE, NOD, Neg Dec, Mitigated Neg Dec, or EIR summary, as applicable, to provide evidence of the required mitigation.

C. CERTIFICATION

I certify that the information contained in this project Application form, including required attachments, is accurate and that I have read and understand the Assurances which are a part of this Application.

Signed _____ Date _____
(Grant Applicant's Authorized Representative, as shown on the Resolution)